pow

Express Mail Label No. EB615294713US

Attorney's Reference: MICROM19.D04

Other than Small Entity

re the Application of: Hubert EUVRARD, ET AL.

Application No.: 10/542,451

Filed: July 15, 2005

For: IMPROVEMENT TO DENTAL POWER INSTRUMENTS, SUCH AS

ENDODONTIC INSTRUMENTS, AND CONTRA-ANGLE HANDPIECE

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Small Entity

Sir:

Transmitted herewith is a Reply for the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has previously been established.
- [] No additional fee for claims is required.

	(Col. 1)		(Col. 2)		(Co1. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA	ADDITIONAL FEE	<u>0r</u>	ADDITIONAL FEE
TOTAL	4	MINUS	20	=	0	× 25 = \$	_	× 50 = \$
INDEPENDENT	1	MINUS	3	_=	0	× 105 = \$	_	× 210 = \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ 185 = \$	_	+ 370 = \$
						TOTAL = \$	OR	TOTAL = \$

[] It is hereby petitioned for an extension of time in accordance with 37 C.F.R. §1.136(a). The appropriate fee required by 37 C.F.R. §1.17 is calculated as shown below.

		OCITO	CHAIL	лист	Litercy	
	Response filed within:	Response filed within:				
	[] first - \$60.00	[]	first	-	\$ 120.00	
	[] second - \$230.00	[]	second	-	\$ 460.00	
	[] third - \$525.00	[]	third	-	\$1,050.00	
	[] fourth - \$820.00	[]	fourth	_	\$1,640.00	
	month after time period set	mont	h after	time	period set	
1	Please charge my Deposit Account No. 03-2405 in the amount of	\$		Δ	lunlicate conv	

- Please charge my Deposit Account No. 03-2405 in the amount of \$_____. A duplicate copy of this sheet is attached.
- [] A check in the amount of \$_____ is attached.
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-2405. A duplicate copy of this sheet is attached.
 - [X] Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.
 - [X] Any patent application processing fees under 37 C.F.R. §1.17.

February 15, 2008 (date)

GARY M. QOHEN, ESQ. Reg. No. 28,834 Attorney for Applicants Telephone: (610) 975-4430



DATE OF DEPOSIT: February 15, 2008 EXPRESS MAIL MAILING LABEL NO.: EB615294713US

REFERENCE:

MICROM19.D04

INVENTORS:

Hubert EUVRARD, ET AL.

TITLE:

IMPROVEMENT TO DENTAL POWER INSTRUMENTS,

SUCH AS ENDODONTIC INSTRUMENTS, AND

CONTRA-ANGLE HANDPIECE

The following items are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and addressed to "Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450":

- 1. Reply to Office Action (11 pages)
- 2. Abstract
- 3. Substitute Specification (11 pages)
- 4. Marked-up Copy of Substitute Specification (16 pages)
- 5. Replacement Sheet of Drawings (1)
- 6. Copies of DE 10 18 190 and DE 855 305
- 7. Reply Transmittal (in duplicate)
- 8. Postcard Receipt

It is respectfully requested that these items be accorded a filing date corresponding to the above-indicated date of deposit under 37 C.F.R. §1.10.

GARY M. COHEN, ESQ. Reg. No. 28,834